



Volunteer Opportunity

The Direct Primary Election is being held on Tuesday, June 3, 2008. There is a great opportunity to experience the behind the scenes election process by volunteering in the Tally Center Operation. There are various tasks that volunteers can assist with after the polls close. A few tasks are described below.

- Unpack the election boxes delivered by the Sheriff Reserves and verify precinct and sequence numbers on the Official Ballot boxes.
- Participate in the Inspection procedures of the Official Ballot boxes to ensure the precinct and sequence numbers are logged on the Inspection Board Log.

Community Service Hours can be earned by volunteering with the Registrar of Voters. A certificate of hours will be mailed to your home. Volunteer positions are for election night, Tuesday, June 3, 2008.

Requirements:

- Must be 16 years of age or older
- Enrolled in at least one AP course
- Work Location: Kearny Mesa area at,
5201 Ruffin Road, Suite I
San Diego, CA 92123
Business Hours: 8:00am-5:00pm
- Work Schedule: 8:00pm to 1:00am
- Dress Code: Crop top, spaghetti straps, flip-flops, open-toed shoes (for safety reasons) are not permitted.
- If interested complete a Student Volunteer Application. It requires your parents' signature if you are under the age of 18. This form is required for the issuance of a temporary badge, due to the sensitivity of the election process.
- Drop off or mail the application by Friday, May 23rd at,
Registrar of Voters
Attention: Susie Gutierrez
5201 Ruffin Road, Suite I
San Diego, CA 92123

If you have any questions please contact Susie Gutierrez, Volunteer Coordinator at (858) 694-3427.



STUDENT VOLUNTEER APPLICATION

(Please fill out completely)

NAME: _____

ADDRESS: _____

HOME PHONE: _____

REASON FOR VOLUNTEERING COMMUNITY SERVICE HOURS

JOB FUNCTIONS / TITLE? TALLY CENTER OPERATIONS

PLEASE LIST ANY PREVIOUS VOLUNTEER EXPERIENCE / TRAINING _____

MUST BE AVAILABLE FROM: 8:00PM-1:00AM

CERTIFICATE OF APPRECIATION WILL BE MAILED

REFERRED BY? _____

PLEASE LIST ONE REFERENCE _____

EMERGENCY CONTACT INFORMATION

NAME: _____

PHONE NUMBER: _____

Parent Signature Date

Student Signature Date